



United States Environmental Protection Agency
Washington, D. C. 20460

Water Compliance Inspection Report

Section A: National Data Coding (i.e., PCS)

| Transaction | Code | NPDES | yr / mo / dy | Inspection Type | Inspector | FacType | | | | | | | | | | | | | |
|----------------------|------|-------------------------------------|--------------|-----------------|-----------|---------|---|----|----|----------|----|----|----|----|----|----|----|----|----|
| 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 | 12 | 13 | 14 | 15 | 16 | 17 | 18 | 19 | 20 |
| | | | | | | | | | | | | | | | | | | | |
| Remarks | | | | | | | | | | | | | | | | | | | |
| 21 | | | | | | | | | | | | | | | | | | | |
| 66 | | | | | | | | | | | | | | | | | | | |
| Inspection Work Days | | Facility Self-Monitoring Evaluation | | | | BI | | QA | | Reserved | | | | | | | | | |
| 67 | | 68 | | 69 | | 70 | | 71 | | 72 | | 73 | | 74 | | 75 | | 80 | |
| | | | | | | | | | | | | | | | | | | | |

Section B: Facility Data

| | | |
|---|--|------------------------|
| Name and Location of Facility Inspected (For industrial users discharging to POTW, also include POTW name and NPDES permit number) Bledsoe County Correctional Complex Mitigation Site | Entry Time / Date | Permit Effective Date |
| | 01/09/13 10:20am | 02/02/10 |
| | Exit Time / Date | Permit Expiration Date |
| | 01/09/13 | 05/23/16 |
| Name(s) of On-Site Representative(s)/Title(s)/Phone and Fax Number(s) Greg Steck/Official Contact/615-253-2160 Project Manager, Department of F & A | Other Facility Data (e.g., SIC NAICS, and other descriptive information) | |
| Name, Address of Responsible Official/Title/Phone and Fax Number 312 Rosa L Parks Avenue, Suite 2200 Nashville, TN 37243 | | |
| Contacted <input type="checkbox"/> Yes <input type="checkbox"/> No | | |

Section C: Areas Evaluated During Inspection (Check only those areas evaluated)

| | | | |
|--|---|--|------------------------------|
| <input type="checkbox"/> Permit | <input type="checkbox"/> Self-monitoring Program | <input type="checkbox"/> Pretreatment Program | <input type="checkbox"/> MS4 |
| <input type="checkbox"/> Records / Reports | <input type="checkbox"/> Compliance Schedule | <input type="checkbox"/> Pollution Prevention | |
| <input type="checkbox"/> Facility Site Review | <input type="checkbox"/> Laboratory | <input type="checkbox"/> Storm Water | |
| <input type="checkbox"/> Effluent / Receiving Waters | <input checked="" type="checkbox"/> Operation & Maintenance | <input type="checkbox"/> Combined Sewer Overflow | |
| <input type="checkbox"/> Flow Measurement | <input type="checkbox"/> Sludge Handling / Disposal | <input type="checkbox"/> Sanitary Sewer Overflow | |

Section D: Summary of Findings/Comments

(Attach additional sheets of narrative and checklists, including Single Event Violation codes, as necessary)

| SEV Codes | SEV Description |
|-----------|--|
| D O R 1 8 | FAILURE TO APPLY FOR A NOTICE OF TERMINATION |
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|--|---|----------------------------|
| Name (s) and Signature(s) of Inspector(s) Micah Gravitt | Agency/Office/Phone and Fax Numbers Tennessee Division of Water Resources Chattanooga Field Office (423)634-2547 (423)634-6389 (FAX) | Date 02/05/13 |
| Signature of Management Q A Reviewer | Agency/Office/Phone and Fax Numbers Tennessee Division of Water Resources Chattanooga Field Office (423)634-5719 Same as above (FAX) | Date 02/05/13 2/6/13 |